PATENT

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MAC-106 Attorney's Docket No._

COMBINED DECLARATION AND POWER OF ATTORNEY

(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL. DIVISIONAL, CONTINUATION OR CIP)

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration is of the following type: (check one applicable item below)

[X] original

[] design

[] supplemental

If the declaration is for an International Application being filed as a divisional, continuation or continuation-in-part application do <u>not</u> check next item; check appropriate one of last three items. NOTE:

[X] national stage PCT

NOTE: If one of the following 3 items apply then complete and also attach ADDED PAGES FOR DIVISIONAL, CONTINUATION OR CIP.

[] divisional] continuation

| continuation-in-part (CIP)

INVENTORSHIP IDENTIFICATION

WARNING: If the inventors are each not the inventors of all the claims an explanation of the facts, including the ownership of all the claims at the time the last claimed invention was made, should be submitted.

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TITLE OF INVENTION

DATA COMMUNICATION IN A WIRELESS LOCAL AREA NETWORK USING M-ARY

CODE KEYING

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SPECIFICATION IDENTIFICATION

the		ation of which: (comple		
į	(a) []	is attached hereto.		
:	(b) []	was filed on		as
:		[] Serial No. 0	/ or	
		[] Express Mail	No.	, as Serial
		No. not yet	known	
		and was amended on		(If applicable)
accord those	ded a filing de filed with the	te by being referred to in the de	ciaration. Accordir se of a supplemental	declaration, are those amendments
:	(c) [X]	was described and c Application No	PCT/IB00/005	CT International
		and as amended un	der PCT Arti	icle 19 on
;		(if any)		

ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

[] In compliance with this duty there is attached an information disclosure statement. 37 C.F.R. 1.97.

PRIORITY CLAIM

I hereby claim foreign priority benefits under Title 35, United States Code, \$119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

(complete (d) or (e))

- (d) [] no such applications have been filed.
- (e) [X] such applications have been filed as follows.

NOTE: Where item (c) is entered above and the International Application which designated the U.S. claimed priority check item (e), enter the details below and make the priority claim.

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EARLIEST FOREIGN APPLICATION(S), IF ANY FILED WITH 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

COUNTRY	APPLICATION NO.	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 37 USC 119		
	PCT/IB00/00536	27th April 2000	[X]YES []NO		
			[]YES []NO		
			[]YES []NO		
			[]YES []NO		
			[]YES []NO		
			[]YES		
	ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION				
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POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

(check the following item, if applicable)

[] Attached as part of this declaration and power of attorney is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).

SEND CORRESPONDENCE TO:	DIRECT TELEPHONE CALLS TO:
Barry R. Lipsitz,	(Name and telephone number)
Bradford Green, Building 8,	٥
755 Main Street, Monroe,	
Connecticut 06458, U.S.A.	001-203-4590200

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE (S)

	Full name of sole or first inventor Inventor's signature Date 17th May 2000 Country of Citizenship Residence 33 Crosters Lea, Yeadon, Leeds LS19 7WE, United Kingdom
	Post Office Address (same as above)
\	Full name of second joint inventor AL DABBAGH, Ahmed Inventor's signature Country of Citizenship United Kingdom Residence Flat 30 Cliff Court, 46 Cliff Road, Leeb LS6 2ET, England, 7 KGNOM LANK, Leens, LS3-INE, UK Post Office Address (same as above)

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